## **Application Data Sheet**

# AP20 Rec'd PCT/PTO 25 JUL 2008

# **Application Information**

Application number::	
Filing Date::	07/25/06
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	TREATMENT OF NEURODEGENERATIVE DISEASES BY THE USE OF GPR49
Attorney Docket Number::	50125/113001
Request of Early Publication?::	No
Request of Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	

Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany
Status::	Full Capacity
Given Name::	Carsten
Middle Name::	
Family Name::	HOPF
Name Suffix::	
City of Residence::	Mannheim
State or Province of Residence::	
Country of Residence::	GERMANY
Street of mailing address::	Nietzschestrasse 30
City of mailing address::	Mannheim
State or Province of mailing address::	
Country of mailing address::	GERMANY
Postal or Zip Code of mailing address::	68165
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Holland
Status::	Full Capacity
Given Name::	Gerard
Middle Name::	
Family Name::	DREWES

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Name Suffix:: City of Residence:: Heidelberg State or Province of Residence:: Country of Residence:: **GERMANY** Street of mailing address:: Burgstrasse 13 City of mailing address:: Heidelberg State or Province of mailing address:: Country of mailing address:: **GERMANY** Postal or Zip Code of mailing address:: 69121 Applicant Authority Type:: Inventor Primary Citizenship Country:: Switzerland Status:: Full Capacity Given Name:: Heinz Middle Name:: Family Name:: RUFFNER Name Suffix:: Bammental City of Residence:: State or Province of Residence:: Country of Residence:: **GERMANY** Street of mailing address:: Schulstrasse 7 City of mailing address:: **Bammental** 

Postal or Zip Code of mailing address:: 69245

**GERMANY** 

State or Province of mailing address::

Country of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 21559

## Representative Information

Representative Customer Number:: 21559

## **Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application National stage of PCT/EP2004/013539 11/29/04

## **Foreign Priority Information**

Country:: Application Number:: Filing Date:: Priority Claimed::

**WIPO** PCT/EP2004/004891 05/07/04 YES WIPO PCT/EP2004/004889 05/07/04 YES EP 04001895.4 01/29/04 YES EP 04001894.7 01/29/04 YES EP 04007447.8 03/26/04 YES

#### **Assignee Information**

Assignee name:: CellZome AG

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State of Province of mailing address::

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Postal or Zip Code of mailing address:: 69117